

DDSN Web Sites Update Request

Date: _____

All information displayed on DDSN Intranet, Extranet, and Internet Web Sites must be submitted to the Director of Community Education for review and recommendation and to the Director of Government and Community Relations, the Director of Information Resource Management, and the appropriate Associate State Director for final approval. Please complete the following for recommended text additions or changes to any DDSN Web Site:

Name: _____

Position: _____

Department/Division: _____

Phone Number: _____

Brief description of request and why recommended: _____

Purpose: _____

Target Audience: _____

Projected frequency of updates: _____

Person(s) responsible for content/update: _____

Please forward a conceptual outline of your request to the Director of Community Education

For Office Use Only

Information/changes recommended for: ☐ intranet ☐ extranet ☐ internet

Information/changes not recommended: ☐ _____

Comments: _____

Director, Community Education

Approved ☐

Disapproved ☐

Date: _____

Director, Information Resource Management

Approved ☐

Disapproved ☐

Date: _____

Director, Government & Community Relations

Approved ☐

Disapproved ☐

Date: _____

Associate State Director

Approved ☐

Disapproved ☐

Date: _____

Thank you for completing our Web Sites Update Request form. Your input is very much appreciated and will be very helpful in improving our Web Sites.